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** CONTINUING DATA *****

-none *KTD*

** FOREIGN APPLICATIONS *****

-none *KTD*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/23/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY NC	SHEETS DRAWING 8	TOTAL CLAIMS 32	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				

Verified and Acknowledged

Examiner's Signature _____ Initials _____

ADDRESS

25259

TITLE

Tool

FILING FEE RECEIVED 1116	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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